

CITY OF SUNNYVALE
Department of Public Works
Engineering Division

OFFICE USE ONLY

Permit Number: _____

Date of Issue: _____

Expiration Date: _____

PERMIT FOR ENCROACHMENT

(Non-Transferable)

☐ Construction - Private Facilities

☐ Construction - Public Facilities

☐ Emergency

☐ Occupancy

APPLICANT:

Name: _____

Date: _____

Mailing Address: _____

Phone: _____

☐ Private Individual/Entity

☐ Certificated Communications Co.

☐ Franchised Public Utility

☐ Other: _____

LOCATION: _____

Contractor Name: _____

Phone: _____

Address: _____

Plans: _____ Attached ()

Contractor shall have a _____ license to do permitted work.

DESCRIPTION OF WORK:

	Subgrade	Form	Place	FINAL		Trench	Install	Backfill	FINAL
<input type="checkbox"/>	Sidewalk				<input type="checkbox"/>	Storm			
<input type="checkbox"/>	Driveway				<input type="checkbox"/>	Sewer			
<input type="checkbox"/>	Curb				<input type="checkbox"/>	Gas			
<input type="checkbox"/>	Paving				<input type="checkbox"/>	Water			
Other:					<input type="checkbox"/>	Telephone			
					<input type="checkbox"/>	Electric			
					<input type="checkbox"/>	Fire Service			
					<input type="checkbox"/>				

Completion: _____ **1 Year:** _____

PERMISSION IS HEREBY GRANTED to the above-named applicant for **ENCROACHMENT** specified at the location on or between designated dates in the above application, subject to the conditions listed on the reverse side of this application, SMC Ch. 13.08, plus the following **SPECIAL CONDITIONS:**

I have read the general requirements on the back of this application and shall comply with them, any special conditions, and all provisions of SMC Ch. #13.08, if a permit for this application is granted.

Applicant Understands License Requirement

CONTRACTOR SHALL CALL (408) 730-7415 BEFORE 4:00 PM, 24 HOURS PRIOR TO STARTING ANY WORK AND FOR EACH INSPECTION REQUEST, INCLUDING THE FINAL INSPECTION.

(initial)

Name of Applicant/Agent (print)

Uninspected work will be rejected

(initial)

Signature of Applicant/Agent

(initial)

FEES

CONSTRUCTION (STREET-CUT)

Single Permit to 50 LF \$ _____

Each additional 100 LF or fraction thereof \$ _____

Each additional class of work (i.e., water, sewer) \$ _____

OCCUPANCY/USE OF RIGHT-OF-WAY

Permit Fee \$ _____

TOTAL AMOUNT DUE \$ _____

Insurance Certificate Attached	
Insurance Certificate Waived	
Bond Posted	
Bond Requirement Waived	

Sunnyvale Public Works Official